

Senate File 393 - Introduced

SENATE FILE 393
BY COMMITTEE ON HUMAN
RESOURCES

(SUCCESSOR TO SSB 1001)

A BILL FOR

1 An Act relating to prenatal care including required critical
2 congenital heart disease screening for newborns as part of
3 the state's newborn screening panel and the convening of a
4 task force on prenatal care.

5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 136A.5A Newborn critical congenital
2 heart disease screening.

3 1. Each newborn born in this state shall receive a critical
4 congenital heart disease screening by pulse oximetry or other
5 means as determined by rule, in conjunction with the metabolic
6 screening required pursuant to section 136A.5.

7 2. An attending health care provider shall ensure that
8 every newborn under the provider's care receives the critical
9 congenital heart disease screening.

10 3. This section does not apply if a parent objects to
11 the screening. If a parent objects to the screening of a
12 newborn, the attending health care provider shall document the
13 refusal in the newborn's medical record and shall obtain a
14 written refusal from the parent and report the refusal to the
15 department as provided by rule of the department.

16 4. The results of each newborn's critical congenital heart
17 disease screening shall be reported in a manner consistent with
18 the reporting of the results of metabolic screenings pursuant
19 to section 136A.5.

20 5. This section shall be administered in accordance with
21 rules adopted pursuant to section 136A.8.

22 Sec. 2. NEWBORN CRITICAL CONGENITAL HEART DISEASE
23 SCREENING. Notwithstanding any provision to the contrary
24 relating to the newborn screening policy pursuant to 641 IAC
25 4.3(1), critical congenital heart disease screening shall be
26 included in the state's newborn screening panel as included
27 in the recommended uniform screening panel as approved by
28 the United States secretary of health and human services.
29 The center for congenital and inherited disorders advisory
30 committee shall make recommendations regarding implementation
31 of the screening and the center for congenital and inherited
32 disorders shall adopt rules as necessary to implement the
33 screening.

34 Sec. 3. TASK FORCE ON PRENATAL CARE. The department
35 of public health shall convene a task force to review

1 opportunities to improve prenatal care in the state. The task
2 force shall review overall guidelines and best practices to
3 maximize the possibility of assessing the risk factors for and
4 preventing premature births, stillbirth, and other delivery
5 complications, and shall specifically review guidelines
6 and education relating to prenatal ultrasounds and fetal
7 movement monitoring. The task force shall include but is not
8 limited to inclusion of representatives of perinatologists,
9 neonatologists, obstetricians/gynecologists, sonographers,
10 hospitals, the center for congenital and inherited disorders,
11 and others with interest or expertise in prenatal care. The
12 task force shall report its findings and recommendations to the
13 governor and the general assembly by December 15, 2013.

14 EXPLANATION

15 The bill relates to prenatal care including newborn
16 screenings. The bill requires each newborn born in the state
17 to receive a critical congenital heart disease screening
18 by pulse oximetry or other means as determined by rule, in
19 conjunction with the metabolic screening already required.
20 The bill directs that an attending health care provider shall
21 ensure that every newborn under the provider's care receives
22 the critical congenital heart disease screening, and provides
23 that that requirement does not apply if a parent objects to
24 the screening. If a parent objects, the health care provider
25 is required to document the refusal in the newborn's medical
26 record, obtain a written refusal from the parent, and report
27 the refusal to the department of public health (DPH). The
28 results of each newborn's screening are required to be reported
29 in a manner consistent with the reporting of the results of
30 metabolic screenings. The provisions are to be administered in
31 accordance with rules adopted by the center for congenital and
32 inherited disorders, with assistance provided by DPH.

33 The bill directs that the critical congenital heart disease
34 screening shall be included in the state's newborn screening
35 panel. The bill requires the center for congenital and

1 inherited disorders advisory committee to make recommendations
2 regarding implementation of the screening and the center for
3 congenital and inherited disorders to adopt rules as necessary
4 to implement the screening.

5 The bill directs DPH to convene a task force to review
6 opportunities to improve prenatal care in the state. The task
7 force is to review overall guidelines and best practices to
8 maximize the possibility of assessing the risk factors for and
9 preventing premature births, stillbirth, and other delivery
10 complications, and to specifically review guidelines and
11 education relating to prenatal ultrasounds and fetal movement
12 monitoring. The bill specifies the membership of the task
13 force and directs the task force to report its findings and
14 recommendations to the governor and the general assembly by
15 December 15, 2013.